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TO Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number. Docket Number (Optional) ÉTITION FOR EXTENSION OF TIME LINDER 37 CFR 1.136(a) FY 2009 58086-235854 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H. R. 4818).) 10/590.445-Conf. #6734 Filed Application Number August 24, 2006 METHODS AND MATERIALS FOR ASSESSING PROSTATE CANCER THERAPIES AND COMPOUNDS Art Unit 1614 Examiner Savitha M. Rao This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Fee Small Entity Fee One month (37 CFR 1.17(a)(1)) \$130 \$65 65.00 Two months (37 CFR 1.17(a)(2)) \$490 \$245 Three months (37 CFR 1.17(a)(3)) \$1110 \$555 Four months (37 CFR 1.17(a)(4)) \$1730 \$865 Five months (37 CFR 1.17(a)(5)) \$2350 \$1175 X Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to 22-0261 Deposit Account Number WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number 46,722 attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 November 24, 2008 Signature Lars H. Genieser, Ph.D (202) 344-4000 Typed or printed name Telephone Number NOTE: Signatures of all the inventors or essignees of record of the entire interest or their representative(s) ere required. Submit multiple forms if more Total of forms are submitted.

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